

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF		COURT CASE NUMBER
Antwhon Suiter		5:22-cv-00031
DEFENDANT		TYPE OF PROCESS
County of Augusta et al		Summons & Complaint

SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION	OF PROPERTY TO SEIZE OR CONDEMN
AT	Donald Smith 127 Lee Highway, Verona, VA 24482	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
Antwhon Suiter, Pro Se 207 Gray Avenue Staunton, VA 24401	1
	Number of parties to be served in this case
	4
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):	
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Signature of Attorney other Originator requesting service on behalf of X , Pro Se	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	470-786-6830	06/08/2022

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE				
I acknowledge receipt for the total number of process indicated <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process <u>1</u>	District of Origin <u>No. 84</u>	District to Serve <u>No. 84</u>	Signature of Authorized USMS Deputy or Clerk <u>C. M. Daniels</u>
				Date <u>06/13/2022</u>

I hereby certify and return that I <input checked="" type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.
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<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below).

Name and title of individual served (if not shown above)	Date <u>6-30-22</u>	Time <u>1240</u>	<input type="checkbox"/> am <input checked="" type="checkbox"/> pm
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Address (complete only different than shown above)	Signature of U.S. Marshal or Deputy <u>A.P.</u>		
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Service Fee <u>\$65.00</u>	Total Mileage Charges <i>(including endeavor)</i> <u>\$25.52</u>	Forwarding Fee <u>—</u>	Total Charges <u>\$90.52</u>	Advance Deposits <u>—</u>	Amount owed to U.S. Marshal* or (Amount of Refund*) <u>—</u>
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REMARKS

6-30-22 - 1 DUSM, 1 HR 44 miles Rando Trip, endeavor

(AP)

AO 440 (Rev. 06-12) (97-17 WD VA) Summons in a Civil Action (Page 2)

Civil Action No. 5:22cv31

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *name of individual and title if any*
 was received by me on *date* **6-13-22**

DONALD SMITH

I personally served the summons on the individual at *place* **127 Lee Hwy** *on date* **6-30-22** *or*

I left the summons at the individual's residence or usual place of abode with *name*,
on date, , a person of suitable age and discretion who resides there,
 and mailed a copy to the individual's last known address; or

I served the summons on *name of individual*,
 designated by law to accept service of process on behalf of *name of organization*,
on date , who is

I returned the summons unexecuted because
 Other *specify*

My fees are \$ **25.52** for travel and \$ **65.00** for services, for a total of \$ **90.52**

I declare under penalty of perjury that this information is true.

Date: **7-1-22**

 Server's signature

Andy Parr Dusm
 Printed name and title

**116 N. Main St.
 Harrisonburg, VA 22801**
 Server's address

Additional information regarding attempted service, etc:

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF		COURT CASE NUMBER
Antwhon Suiter		5:22-ev-00031
DEFENDANT		TYPE OF PROCESS
County of Augusta et al		Summons & Complaint

SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
AT	Dylan Johnson 127 Lee Highway, Verona, VA 24482	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
Antwhon Suiter, Pro Se 207 Gray Avenue Staunton, VA 24401	1
	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Signature of Attorney/other Originator requesting service on behalf of: <i>Antwhon Suiter</i> , Pro Se	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 470-786-6830	DATE <i>06/08/2022</i>
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE				
I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted.)</i>	Total Process <i>1</i>	District of Origin No. <i>84</i>	District to Serve No. <i>84</i>	Signature of Authorized USMS Deputy or Clerk <i>Condinerille</i>
				Date <i>06/19/2022</i>

I hereby certify and return that I have personally served have legal evidence of service have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (see remarks below).

Name and title of individual served (*if not shown above*)
DONALD SMITH - SHERIFF

Address (*complete only different than shown above*)

Signature of U.S. Marshal or Deputy
[Signature]

Service Fee <i>\$65.00</i>	Total Mileage Charges <i>\$125.52</i> <i>(including endeavors)</i>	Forwarding Fee <i>-</i>	Total Charges <i>\$190.52</i>	Advance Deposits <i>-</i>	Amount owed to U.S. Marshal* or (Amount of Refund*) <i>-</i>
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REMARKS

6-30-22- 1 DUSM, 1 HR 44 miles Rnd. Trip, ENDENOR

(AP)

AO 440 (Rev. 06-12) (02-17 WD-VVA) Summons in a Civil Action (Page 2)

Civil Action No. 5:22-cv-31

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

This summons for (name of individual and title, if any)
was received by me on (date) 6-13-22

Dylan Jansson

- I personally served the summons on the individual at *place*,
on *date*, or
 I left the summons at the individual's residence or usual place of abode with *name*,
, a person of suitable age and discretion who resides there,
on *date*, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* **DONALD SMITH - SHERIFF**, who is designated by law to accept service of process on behalf of *(name of organization)* **AUGUSTA CITY**.
SHERIFF'S DEPT. on date **6-30-22**; or

- I returned the summons unexecuted because _____; or
 Other (specify) _____

My fees are \$ 25.52 for travel and \$ 65.60 for services, for a total of \$ 91.12

I declare under penalty of perjury that this information is true.

Date: 7-1-22

on is true.

Server's signature

Andy Paer DUSM
Printed name and title

116 N. MAIN ST.

HARRISONBURG, VA 22801

Never is the Present

Additional information regarding attempted service, etc:

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Antwhon Suiter	COURT CASE NUMBER 5:22-cv-00031
DEFENDANT County of Augusta et al	TYPE OF PROCESS Summons & Complaint

SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Augusta County Sheriff's Department ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 207 Lee Highway, Venona VA 24482
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SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Antwhon Suiter, Pro Se 207 Gray Avenue Staunton, VA 24401	Number of process to be served with this Form 285 1
	Number of parties to be served in this case 4
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Signature of Attorney other Originator requesting service on behalf of X , Pro Se	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 470-786-6830	DATE 06/08/2022
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE				
Acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 84	District to Serve No. 84	Signature of Authorized USMS Deputy or Clerk CMD in middle
Date 06/13/2022				

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (see remarks below).

Name and title of individual served (if not shown above) DORALD SMITH - SHERIFF	Date 6-30-22	Time 1240	<input type="checkbox"/> am <input checked="" type="checkbox"/> pm
Address (complete only different than shown above)	Signature of U.S. Marshal or Deputy AP		

Service Fee \$65.00	Total Mileage Charges (including endeavors) \$25.52	Forwarding Fee -	Total Charges \$90.52	Advance Deposits -	Amount owed to U.S. Marshal* or (Amount of Refund*) -
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REMARKS

6-30-22 - 1 DUSM, 1HR, 44 miles RND TRIP, ENDEAVOR
(AP)

AO 440 (Rev. 06/12) (02/17 WD/VA) Summons in a Civil Action (Page 2)

Civil Action No. 5:22-cv-00031

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for (name of individual and title, if any) _____
 was received by me on (date) 6-13-22

AUGUSTA CTY SHERIFF'S DEPT. I personally served the summons on the individual at (place) _____

5:22-cv-00031

on (date) _____ ; or

 I left the summons at the individual's residence or usual place of abode with (name) _____

, a person of suitable age and discretion who resides there,

on (date) _____, and mailed a copy to the individual's last known address; or

I served the summons on (name of individual) DONALD SMITH - SHERIFF, who is
 designated by law to accept service of process on behalf of (name of organization)
SHERIFF'S DEPT on (date) 6-30-22; or

 I returned the summons unexecuted because _____ ; or Other (specify): _____My fees are \$ 25.52 for travel and \$ 65.00 for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: 7-1-22

Server's signature

Andy Haar Dusm

Printed name and title

116 N. Main St.HARRISONBURG, VA 22801

Server's address

Additional information regarding attempted service, etc:

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF		COURT CASE NUMBER
Antwhon Suiter		5:22-cv-00031
DEFENDANT		TYPE OF PROCESS
County of Augusta et al		Summons & Complaint

SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT	County of Augusta
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
	18 Government Center Lane,蔚河 VA 24482

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
Antwhon Suiter, Pro Se 207 Gray Avenue Staunton, VA 24401	1
	Number of parties to be served in this case
	4
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):
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Signature of Attorney other Originator requesting service on behalf of X / Pro Se	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 470-786-6830	DATE 06/08/2022
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE			
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Acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted.)	Total Process 1	District of Origin No. 84	District to Serve No. 84	Signature of Authorized USMS Deputy or Clerk Cindimellu	Date 06/13/2022
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I hereby certify and return that I have personally served have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below).

Name and title of individual served (if not shown above) JAMES BENKAHLA - CTY. ATTORNEY (AVGMR)	Date 6-30-22	Time 1225	<input type="checkbox"/> am Pm
Address (complete only different than shown above)	Signature of U.S. Marshal or Deputy AP		

Service Fee \$65.00	Total Mileage Charges (including endeavors) \$25.82	Forwarding Fee -	Total Charges \$98.82	Advance Deposits -	Amount Owed to U.S. Marshal* or (Amount of Refund*) -
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REMARKS

6-30-22 - 100SM, 1HR 44 miles RND TRIP, ENDEAVOR
(AP)

AO 440 (Rev. 06/12) (02/17 WD/VA) Summons in a Civil Action (Page 2)

Civil Action No. 5:22-cv-00031

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for (name of individual and title, if any) _____
 was received by me on (date) b-13-22

County of Augusta I personally served the summons on the individual at (place) _____

5:22-cv-00031

on (date) _____ ; or

 I left the summons at the individual's residence or usual place of abode with (name) _____

, a person of suitable age and discretion who resides there,

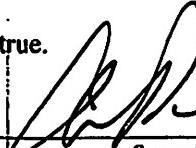
on (date) _____ , and mailed a copy to the individual's last known address; or

I served the summons on (name of individual) JAMES BENKAHLA - ATTORNEY, who is
 designated by law to accept service of process on behalf of (name of organization)
County of Augusta
 on (date) b-30-22 ; or

 I returned the summons unexecuted because _____ ; or Other (specify): _____

My fees are \$ 25.52 for travel and \$ 65.00 for services, for a total of \$ 90.52.

I declare under penalty of perjury that this information is true.

Date: 7-1-22

Server's signature

Andy Parr Dusm

Printed name and title

116 N. Main StHARRISONBURG, VA 22801

Server's address

Additional information regarding attempted service, etc: